## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

|   |  |   | SMALL ENTITY |                       | OTHER THAN                   |                  |             |                         |                        |     |                         |                        |  |
|---|--|---|--------------|-----------------------|------------------------------|------------------|-------------|-------------------------|------------------------|-----|-------------------------|------------------------|--|
|   |  |   | (Column      | 1)                    | (Colum                       | n 2)             | ]<br>}<br>- | TYPE [                  |                        | OR  | SMALL                   | ENTITY                 |  |
| TOTAL CLAIMS  |  |   |              |                       |                              |                  |             | RATE                    | FEE                    |     | RATE                    | FEE                    |  |
| FOR   |  |   | NUMBER FILED |                       | NUMBE                        | R EXTRA          |             | BASIC FEE               | 385.00                 | OR  | BASIC FEE               | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20=    |                       | *                            |                  |             | XS 9=                   |                        | OR  | X\$1.8=                 |                        |  |
| INDEPENDENT CLAIMS  |  |   | minus 3 =    |                       | *                            |                  |             | X43=                    |                        | OR  | X86=                    | ·                      |  |
| MUI   | TIPLE DEPEN  | DENT CLAIM PF                             | RESENT       | <u>.</u>              | ·                            |                  |             | +145=                   |                        | OR  | +290=                   |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                    |  |   |              |                       |                              |                  |             | TOTAL                   |                        | OR  | TOTAL                   |                        |  |
| CLAIMS AS AMENDED - PART II  (Column 2) (Column 3)  |  |   |              |                       |                              |                  |             | SMALL ENTITY            |                        |     | OTHER THAN SMALL ENTITY |                        |  |
| ITA   | 1000   | CLAIMS<br>REMAINING<br>AFTER              |              | HIGH<br>NUM<br>PREVIO | BER<br>DUSLY                 | PRESENT<br>EXTRA |             | RATE                    | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total  | * 36                                      | Minus        | ** (                  | 38                           | =/               |             | X\$ 9=                  |                        | OR  | X\$18=                  |                        |  |
| MEN   | Independent  | • 🔻                                       | Minus        | ***                   | 8/                           |                  |             | X43=                    |                        | OR  | X86=                    |                        |  |
| 4   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |              |                       |                              |                  | j           | +145=                   |                        | OR  | +290=                   |                        |  |
|   |  |   |              |                       |                              |                  |             | — -TOTAL-<br>ADDIT. FEE |                        | OR- | TOTAL<br>ADDIT. FEE     |                        |  |
| (Outumn 3)  |  |   |              |                       |                              |                  |             |                         |                        |     |                         | a. 29 9                |  |
| 18  |  | (Column 1) CLAIMS REMAINING AFTER         |              | HIGH<br>NUM<br>PREVI  | HEST<br>IBER<br>OUSLY        | PRESENT<br>EXTRA |             | RATE                    | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Tabel  | AMENDMENT                                 | Minus        | PAID                  | FOR                          | =                | 1           | X\$ 9=                  |                        | OR  | X\$18=                  |                        |  |
| IEND  | Total Independent  | *   | Minus        | ***                   |                              | =                |             | X43=                    |                        | OR  | X86=                    |                        |  |
| AN  | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |   |              |                       |                              |                  | ]           | +145=                   |                        | OR  | +290=                   |                        |  |
|   |  |   |              |                       |                              |                  |             | TOTAL                   | ·                      | OR  | TOTAL                   |                        |  |
| ADDIT FEE ADDIT FEE   |  |   |              |                       |                              |                  |             |                         |                        |     |                         |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |              |                       |                              |                  |             |                         |                        |     |                         | 4001                   |  |
| NTC   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUM<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |             | RATE                    | ADDI-<br>TIONAL<br>FEE |     | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
| AMENDMENT   | Total  | *   | Minus        | **                    |                              | =                |             | X\$ 9=                  |                        | OR  | X\$18=                  |                        |  |
|   | Independent  | *   | Minus        | ***                   |                              | =                |             | X43=                    |                        | OR  | X86=                    | i                      |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=   |   |              |                       |                              |                  |             |                         |                        | OR  | +290=                   |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * TOTAL  * ADDIT FEE |  |   |              |                       |                              |                  |             |                         |                        | OR  | TOTAL ADDIT. FEE        |                        |  |
| =   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                       |                              |                  |             |                         |                        |     |                         |                        |  |

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